

Fill in this information to identify the case:

Debtor Compassionate Homecare, Inc.
 United States Bankruptcy Court for the: _____ District of MA
 (If known) _____ (State)

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

2.1 Priority creditor's name and mailing address

Com of MA- Dept of Rev
P.O. Box 7000
Boston, MA 02204

Date or dates debt was incurred

01/01/2016-04/30/2016

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

As of the petition filing date, the claim is: \$ _____

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:
taxes

Is the claim subject to offset?

- ☐ No
☒ Yes

Total claim

Priority amount

\$ 488024.71

2.2 Priority creditor's name and mailing address

Date or dates debt was incurred

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()

As of the petition filing date, the claim is: \$ _____

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

2.3 Priority creditor's name and mailing address

Date or dates debt was incurred

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()

As of the petition filing date, the claim is: \$ _____

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

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Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	<p>Nonpriority creditor's name and mailing address</p> <p>Yvette Beauge</p> <p>14 JFK Ave,</p> <p>Clinton, MA 01510</p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u></p> <p>Last 4 digits of account number <u>0026</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 616</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
3.2	<p>Nonpriority creditor's name and mailing address</p> <p>Kettly Beauge</p> <p>232 Maple St</p> <p>Lynn, MA 01904</p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u></p> <p>Last 4 digits of account number <u>0027</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 784</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
3.3	<p>Nonpriority creditor's name and mailing address</p> <p>Giovanna Belen</p> <p>25 Cargill Ave, Apt 1</p> <p>Worcester, MA 01610</p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u></p> <p>Last 4 digits of account number <u>0028</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 280</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
3.4	<p>Nonpriority creditor's name and mailing address</p> <p>Lourdes Belliard</p> <p>11 Summer St, Apt N-105</p> <p>Lawrence, MA 01840</p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u></p> <p>Last 4 digits of account number <u>0029</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 392</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
3.5	<p>Nonpriority creditor's name and mailing address</p> <p>Nora Beltran</p> <p>101 Dracut St, Apt 1</p> <p>Lawrence, MA 01843</p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u></p> <p>Last 4 digits of account number <u>0030</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 420</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wagess</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
3.6	<p>Nonpriority creditor's name and mailing address</p> <p>Cindy Berthiaume</p> <p>282 Main Street</p> <p>Spencer, MA 01562</p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u></p> <p>Last 4 digits of account number <u>0031</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 1050</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>

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Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Maria Betances</u> <u>16 Beacon St, Apt 7</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>392</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0032</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Wendy Burgos</u> <u>47 Acton St, Apt 1</u> <u>Worcester, MA 01604</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>1946</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0033</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Rumaire Cabrera</u> <u>96 Osgood St</u> <u>Lawrence, MA 01843</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>392</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0034</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Mirlene Cadet</u> <u>278 Canton St</u> <u>Randolph, MA 02368</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>854</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0035</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Yatitza Caraballo</u> <u>78 Warwick St</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>252</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0036</u>	Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	<p>Nonpriority creditor's name and mailing address</p> <p>Edwin Carrasquillo</p> <p>PO Box 2399</p> <p>Worcester, MA 01613</p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u></p> <p>Last 4 digits of account number <u>0037</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 2940</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
3.2	<p>Nonpriority creditor's name and mailing address</p> <p>Lady Castano</p> <p>223 Perry St, Apt 2</p> <p>Lowell, MA 01852</p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u></p> <p>Last 4 digits of account number <u>0038</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 392</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
3.3	<p>Nonpriority creditor's name and mailing address</p> <p>Yuly Castro</p> <p>PO Box 6422</p> <p>Chelsea, MA 02150</p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u></p> <p>Last 4 digits of account number <u>0039</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 225</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
3.4	<p>Nonpriority creditor's name and mailing address</p> <p>Carolyn Cepeda</p> <p>90 Cluf Crossing, Apt 7</p> <p>Salem, NH 03079</p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u></p> <p>Last 4 digits of account number <u>0040</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 980</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
3.5	<p>Nonpriority creditor's name and mailing address</p> <p>Maria Chaparro</p> <p>17 Henry St, Apt 2</p> <p>Southbridge, MA 01550</p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u></p> <p>Last 4 digits of account number <u>0041</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 784</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
3.6	<p>Nonpriority creditor's name and mailing address</p> <p>Jean Charles</p> <p>36 Patterson Ave</p> <p>Brockton, MA 02301</p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u></p> <p>Last 4 digits of account number <u>0042</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 1658</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>

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Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Jennifer Corea</u> <u>11 Congress Ave, Apt 201</u> <u>Chelsea, MA 02150</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>252</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0043</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Angelica Cruz</u> <u>550 Broadway St</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>294</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0044</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Lymarie DeJesus</u> <u>10 Vale St, Apt 1</u> <u>Worcester, MA 01604</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>784</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0045</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Ana DelRio</u> <u>13 Vesper St</u> <u>Worcester, MA 01602</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>168</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0046</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Mirka Diaz</u> <u>27 Whipple St, Apt 2</u> <u>Worcester, MA 01607</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>238</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0047</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1	Nonpriority creditor's name and mailing address Jennifer Diaz 80 Butler St, Apt 2 Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 294
	Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0048	Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2	Nonpriority creditor's name and mailing address Ana Diaz Bonilla 8 Irene St, Apt 3 Worcester, MA 01603	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 280
	Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0049	Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.3	Nonpriority creditor's name and mailing address Ramona Difo 499 Hampshire St Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 798
	Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0050	Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.4	Nonpriority creditor's name and mailing address Juana Difo 8 Memorial Circle, Apt 8 Andover, MA 01810	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1778
	Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0051	Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.5	Nonpriority creditor's name and mailing address Lidia Dominguez 75 Center St Methuen, MA 01844	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 210
	Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0052	Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.6	Nonpriority creditor's name and mailing address Sara Escarraman 84 Sullivan Ave Lawrence, MA 01843	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 392
	Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0053	Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Rosa Estrella</u> <u>54 Lawrence St</u> <u>Lawrence, MA 01840</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>560</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0054</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Emmanuel Feraud</u> <u>28 Esther St</u> <u>Worcester, MA 01607</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>616</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0055</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Evelyn Feraud</u> <u>28 Esther St</u> <u>Worcester, MA 01607</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>952</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0056</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Elsa Garcia</u> <u>319 High St., Apt 2</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>420</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0057</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Ara Ghanaghounian</u> <u>66 East Main St</u> <u>Southbridge, MA 01550</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>588</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0058</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1	Nonpriority creditor's name and mailing address Ruth Gomez Ramirez 33 Brook St, Apt 2 Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1120
	Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0059	Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2	Nonpriority creditor's name and mailing address Virgen Gonzalez 123 Union St Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 294
	Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0060	Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.3	Nonpriority creditor's name and mailing address Rachael Grace 17B Gates Rd Worcester, MA 01603	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 252
	Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0061	Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.4	Nonpriority creditor's name and mailing address Leopoldina Graseki 1 Russell St, Apt 1 Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 462
	Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0062	Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.5	Nonpriority creditor's name and mailing address Marie Guerrier 31 Pearl St Randolph, MA 02368	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 784
	Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0063	Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.6	Nonpriority creditor's name and mailing address Eulogia Guzman 15B Camden St Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 343
	Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0064	Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Name

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Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Solmary Guzman</u> <u>95 Weare St, 2nd Fl</u> <u>Lawrence, MA 01843</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>1176</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0065</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Jose Guzman</u> <u>26 Duckett Ave</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>1456</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0066</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Nayeni Henriquez</u> <u>145 Margin St</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>490</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0067</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Isis Hernandez</u> <u>95 Jamaica St</u> <u>Lawrence, MA 01843</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>294</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0068</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Joel Hernandez</u> <u>283 Jackson St</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>490</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0069</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor

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Case number (if known)

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	<p>Nonpriority creditor's name and mailing address <u>Rafael Hidalgo</u> <u>42 Sargent St</u> <u>Lawrence, MA 01841</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0070</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 266</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.2	<p>Nonpriority creditor's name and mailing address <u>Maria Hidalgo</u> <u>50 Union St</u> <u>Methuen, MA 01844</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0071</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 1092</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.3	<p>Nonpriority creditor's name and mailing address <u>Claribel Hiraldo</u> <u>146 Woodland Ave, Apt 1</u> <u>Lawrence, MA 01841</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0072</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 168</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.4	<p>Nonpriority creditor's name and mailing address <u>Geovanie Huertas</u> <u>35 Maple St</u> <u>Fitchburg, MA 01840</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0073</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 336</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.5	<p>Nonpriority creditor's name and mailing address <u>Rafael Huertas</u> <u>47 Hawley St, Apt 2R</u> <u>Lawrence, MA 01843</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0074</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 728</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.6	<p>Nonpriority creditor's name and mailing address <u>Victor Infante</u> <u>9 Winslow Pl</u> <u>Lawrence, MA 01840</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0075</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 1515</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor

Name

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	<p>Nonpriority creditor's name and mailing address <u>Garces Ivelices</u> <u>22 Hudson Ave, Apt 2</u> <u>Lawrence, MA 01841</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 588</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed</p>	
	<p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0076</u></p>	<p>Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.	<p>Nonpriority creditor's name and mailing address <u>Elma Jaime</u> <u>11 Longwood St</u> <u>Methuen, MA 01844</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 112</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p>	
	<p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0077</u></p>	<p>Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.	<p>Nonpriority creditor's name and mailing address <u>Julie Jean</u> <u>12 Kabler Ave</u> <u>Milton, MA 02186</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 1344</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p>	
	<p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0078</u></p>	<p>Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.	<p>Nonpriority creditor's name and mailing address <u>Altagracia Jiminez</u> <u>23 Bodwell St</u> <u>Lawrence, MA 01841</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 336</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p>	
	<p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0079</u></p>	<p>Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.	<p>Nonpriority creditor's name and mailing address <u>Paula Jiminez</u> <u>62 Hampshire St, Apt 3B</u> <u>Lawrence, MA 01841</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 672</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p>	
	<p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0080</u></p>	<p>Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1 Nonpriority creditor's name and mailing address

Sonia Jimenez

19 Mott St

Worcester, MA 01604

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ 924

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0081

Is the claim subject to offset?

- ☒ No
☐ Yes

3.2 Nonpriority creditor's name and mailing address

Verlande Joslyn

860 No Montbello St, Apt 2

Brockton, MA 02301

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ 560

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0082

Is the claim subject to offset?

- ☒ No
☐ Yes

3.3 Nonpriority creditor's name and mailing address

Mary Kimani

187 Fairmont St Apt 1

Fitchburg, MA 01840

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ 840

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0083

Is the claim subject to offset?

- ☒ No
☐ Yes

3.4 Nonpriority creditor's name and mailing address

Sally Komba

309 Battlesfarm Dr

Brockton, MA 02301

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ \$2310

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0084

Is the claim subject to offset?

- ☒ No
☐ Yes

3.5 Nonpriority creditor's name and mailing address

Danitza Lebron

7 Freedom Way Rd

Worcester, MA 01605

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ 168

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0085

Is the claim subject to offset?

- ☒ No
☐ Yes

3.6 Nonpriority creditor's name and mailing address

Nelida Leonitti

26 Linda Ave

Methuen, MA 01844

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ 294

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0086

Is the claim subject to offset?

- ☒ No
☐ Yes

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Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. Nonpriority creditor's name and mailing address

Amanda Loch

151 Bellevue St

Lowell, MA 01851

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed☐ Liquidated and neither contingent nor disputed

\$ 672

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0087

Is the claim subject to offset?

☒ No☐ Yes

3. Nonpriority creditor's name and mailing address

Francisca Lopez

14 Enfield St, Apt 3

Worcester, MA 01603

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 252

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0088

Is the claim subject to offset?

☒ No☐ Yes

3. Nonpriority creditor's name and mailing address

Migdalia Lopez

20 Allen Rd

Sturbridge, MA 01566

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 308

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0089

Is the claim subject to offset?

☒ No☐ Yes

3. Nonpriority creditor's name and mailing address

Lizbeth Lopez

64 McGreevey Way, Apt C

Roxbury, MA 02120

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 476

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0090

Is the claim subject to offset?

☒ No☐ Yes

3. Nonpriority creditor's name and mailing address

Felix Lopez

183 Fiske St

Southbridge, MA 01550

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 840

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0091

Is the claim subject to offset?

☒ No☐ Yes

Debtor

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Name

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	<p>Nonpriority creditor's name and mailing address <u>Heidy Luna</u> <u>45 Grand St, Apt 104</u> <u>Worcester, MA 01610</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0092</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 308</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.2	<p>Nonpriority creditor's name and mailing address <u>Jeanne Maingrette</u> <u>40 Lockingham Ave</u> <u>West Roxbury, MA 02132</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0093</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 2212</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.3	<p>Nonpriority creditor's name and mailing address <u>Ortiz De Diaz Mariana</u> <u>260 East Haverhill St, Apt 2</u> <u>Lawrence, MA 01841</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0094</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 210</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.4	<p>Nonpriority creditor's name and mailing address <u>Cesar Martinez</u> <u>15 Bedford St</u> <u>Lawrence, MA 01841</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0095</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 210</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.5	<p>Nonpriority creditor's name and mailing address <u>Altagracia Martinez</u> <u>563 Haverhill St, Apt 2</u> <u>Lawrence, MA 01841</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0096</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 588</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.6	<p>Nonpriority creditor's name and mailing address <u>Argentina Martinez</u> <u>24 Congress St, Apt 3</u> <u>Lawrence, MA 01841</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0097</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 588</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor

Name

Case number (if known)

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Leandro Martinez</u> <u>PO Box 3139</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>1092</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0098</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Yaitza Martinez</u> <u>132 Pattison St, Apt 2</u> <u>Worcester, MA 01604</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>1176</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0099</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Nathalia Matador</u> <u>313 Chatham West Dr</u> <u>Brockton, MA 02301</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>728</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0100</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Flavia Medina</u> <u>312 Water St, Apt 36</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>294</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0101</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Karia Melendez</u> <u>31 Oread St, Apt 26</u> <u>Worcester, MA 01608</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>1176</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0102</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1 Nonpriority creditor's name and mailing address

Hector Mena

618 Lowell St

Lawrence, MA 01841

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 210

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0103

Is the claim subject to offset?

☒ No☐ Yes**3.2 Nonpriority creditor's name and mailing address**

Yesenia Mendez

220 High St

Lawrence, MA 01841

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 392

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0104

Is the claim subject to offset?

☒ No☐ Yes**3.3 Nonpriority creditor's name and mailing address**

Ynocencia Mercedes

30 Brook St

Lawrence, MA 01841

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 280

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0105

Is the claim subject to offset?

☒ No☐ Yes**3.4 Nonpriority creditor's name and mailing address**

Jacqueline Mercedes

45 Oakland Ave

Methuen MA 01844

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 294

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0106

Is the claim subject to offset?

☒ No☐ Yes**3.5 Nonpriority creditor's name and mailing address**

Gloribel Mercedes

28 Suffield St Apt 1

Worcester, MA 01610

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 462

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0107

Is the claim subject to offset?

☒ No☐ Yes**3.6 Nonpriority creditor's name and mailing address**

Damarais Miguel

PO Box 30212

Worcester, MA 01603

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 784

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0108

Is the claim subject to offset?

☒ No☐ Yes

Debtor

Compassionate Homecare Document

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Name

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Christine Mitchell</u> <u>95 Providence St</u> <u>Worcester, MA 01604</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>1092</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0109</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Sonia Mojica</u> <u>1 Wyman St, Apt 3</u> <u>Worcester, MA 01610</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>616</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0110</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Milagros Montalvo</u> <u>11 Glenwood St, Apt 3</u> <u>Worcester, MA 01610</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>1960</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0111</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Nidia Montanez</u> <u>268 Haverhill St</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>392</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0112</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Manual Morales</u> <u>1 Castle St, Apt 1</u> <u>Worcester, MA 01610</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>378</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0113</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor

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Case number (if known)

Name

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1 Nonpriority creditor's name and mailing address

Yasmeiri Morales

534 Haverhill St

Lawrence, MA 01841

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ 420

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0114

Is the claim subject to offset?

- ☒ No
☐ Yes

3.2 Nonpriority creditor's name and mailing address

Dahiana Morales

2 Winthrop Ave

Lawrence, MA 01843

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ 784

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0115

Is the claim subject to offset?

- ☒ No
☐ Yes

3.3 Nonpriority creditor's name and mailing address

Lilliam Moreno

30 Houghton St., Apt 2

Worcester, MA 01610

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ 336

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0116

Is the claim subject to offset?

- ☒ No
☐ Yes

3.4 Nonpriority creditor's name and mailing address

Yanerys Mouliert

1 Duncannon Ave, Apt 7

Worcester, MA 01604

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ 294

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0117

Is the claim subject to offset?

- ☒ No
☐ Yes

3.5 Nonpriority creditor's name and mailing address

Emma Ndolo

740 Central St

Leominster, MA 01453

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ 420

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0118

Is the claim subject to offset?

- ☒ No
☐ Yes

3.6 Nonpriority creditor's name and mailing address

Francisco Nunez

311 Water St

Lawrence, MA 01841

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ 392

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0119

Is the claim subject to offset?

- ☒ No
☐ Yes

Debtor

Name

Case number (if known)

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Irma Oquendo</u> <u>24 Arlington St, Apt 2-R</u> <u>Haverhill, MA 01830</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>322</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0120</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Nayare Ortega</u> <u>13 Kendall St, Apt 2</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>490</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0121</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Patna Ortega</u> <u>28 Woodland Ct</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>504</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0122</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Bartola Ozona</u> <u>59 Reservori Dr</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>56</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0123</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Florence Paul</u> <u>25 Meadow Lane, Apt 12</u> <u>Bridgewater, MA 02324</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>728</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0124</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor

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Case number (if known)

Name

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1 Nonpriority creditor's name and mailing address

Margarita Pena

25a Bromfield St

Lawrence, MA 01841

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 490

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0125

Is the claim subject to offset?

☒ No☐ Yes

3.2 Nonpriority creditor's name and mailing address

Yinette Peralta

86A Bennington St, Apt 3

Lawrence, MA 01841

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 588

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0126

Is the claim subject to offset?

☒ No☐ Yes

3.3 Nonpriority creditor's name and mailing address

Dianne Perez

16 Beacon St, Apt 7

Lawrence, MA 01843

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 196

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0127

Is the claim subject to offset?

☒ No☐ Yes

3.4 Nonpriority creditor's name and mailing address

Jose Ramon Perez

5 Saunders St

Lawrence, MA 01841

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 462

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0128

Is the claim subject to offset?

☒ No☐ Yes

3.5 Nonpriority creditor's name and mailing address

Vitello Perez

PO Box 384

Lawrence, MA 01841

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 504

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0129

Is the claim subject to offset?

☒ No☐ Yes

3.6 Nonpriority creditor's name and mailing address

Ysabel Perez

360 Washington St, Apt 3

Haverhill, MA 01830

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 560

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0130

Is the claim subject to offset?

☒ No☐ Yes

Debtor

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Case number (if known)

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Eva Perez</u> <u>73 Exeter St</u> <u>Lawrence, MA 01843</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>588</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0131</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Silangely Perez</u> <u>55 Perry Ave, Apt 1</u> <u>Worcester, MA 01610</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>1736</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0132</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Lucia Pichardo</u> <u>20 Mason St</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>588</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0133</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Yolanda Polanco</u> <u>23 Hampton St, Apt 1</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>588</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0134</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Paolo Polanco</u> <u>160 Margin St</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>1078</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0135</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor

Compassionate Homecare, Inc. Document

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Case number (if known)

Name

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1 Nonpriority creditor's name and mailing address

Martin Ponce

188 Phillips St

Lawrence, MA 01844

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 294

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0136

Is the claim subject to offset?

☒ No☐ Yes

3.2 Nonpriority creditor's name and mailing address

Yessenia Portalatin

25 Michigan Rd

Worcester, MA 01607

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 2380

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0137

Is the claim subject to offset?

☒ No☐ Yes

3.3 Nonpriority creditor's name and mailing address

Anabella Portillo

145 Cottage St, Apt 2

Chlesea, MA 02150

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 1125

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0138

Is the claim subject to offset?

☒ No☐ Yes

3.4 Nonpriority creditor's name and mailing address

Carolina Portorreal

91 Swan St

Methuen, MA 01844

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 420

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0139

Is the claim subject to offset?

☒ No☐ Yes

3.5 Nonpriority creditor's name and mailing address

Xiomara Portorreal

91 Swan St

Methuen MA 01844

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 1120

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0140

Is the claim subject to offset?

☒ No☐ Yes

3.6 Nonpriority creditor's name and mailing address

Concepcion Quinones

34 Beacon St Apt 3R

Worcester, MA 01608

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 588

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0141

Is the claim subject to offset?

☒ No☐ Yes

Debtor

Compassionate Homecare Document

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Case number (if known)

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address Emilee Quinones 34 West 6th St Lowell, MA 01850 Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0142</u>	As of the petition filing date, the claim is: <u>\$ 2548</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.	Nonpriority creditor's name and mailing address Nancis Ramirez 322 Mill St Worcester, MA 01602 Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0143</u>	As of the petition filing date, the claim is: <u>\$ 462</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.	Nonpriority creditor's name and mailing address Maria Ramirez 33 Brook St, Apt 2 Lawrence, MA 01841 Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0144</u>	As of the petition filing date, the claim is: <u>\$ 2464</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.	Nonpriority creditor's name and mailing address Maria Ramirez Delos Santos 143 Bennington St Lawrence, MA 01841 Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0145</u>	As of the petition filing date, the claim is: <u>\$ 210</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.	Nonpriority creditor's name and mailing address Edit Ramos 6 Upland Garden Dr, Apt. 1 Worcester, MA 01607 Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0146</u>	As of the petition filing date, the claim is: <u>\$ 462</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes

Debtor

Compassionate Homecare, Inc Document

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Case number (if known)

Name

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1 Nonpriority creditor's name and mailing address

Karina Ramos

58 Oread St, Apt 1

Worcester, MA 01608

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 490

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0147

Is the claim subject to offset?

☒ No☐ Yes

3.2 Nonpriority creditor's name and mailing address

Katherine Ramos

2 Warren St

Lawrence, MA 01841

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 784

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0148

Is the claim subject to offset?

☒ No☐ Yes

3.3 Nonpriority creditor's name and mailing address

Nyrra Ramos

161 West Mountain St

Worcester, MA 01610

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 1658

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0149

Is the claim subject to offset?

☒ No☐ Yes

3.4 Nonpriority creditor's name and mailing address

Enriqueta Rivas

139 East Haverhill St

Lawrence, MA 01841

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 294

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0150

Is the claim subject to offset?

☒ No☐ Yes

3.5 Nonpriority creditor's name and mailing address

Paola Rivera

55 Sargent St

Lawrence, MA 01841

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 210

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0151

Is the claim subject to offset?

☐ No☐ Yes

3.6 Nonpriority creditor's name and mailing address

Kassandra Rivera

56 Hollywood St, Apt 3

Worcester, MA 01609

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

\$ 252

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16- 4/1/16

Last 4 digits of account number

0152

Is the claim subject to offset?

☒ No☐ Yes

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Case number (if known)

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Leslie Rivera</u> <u>169 Lawrence St</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>252</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0153</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Yazienette Rivera</u> <u>44 Alder St, 2</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>420</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0154</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Lissette Rivera</u> <u>72B Taralli Terr</u> <u>Framingham, MA 01702</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>504</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0155</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Janilka Rivera</u> <u>52 Great Brook Valley, Apt 6</u> <u>Worcester, MA 01605</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>588</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0156</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Luz Rivera</u> <u>169 Perry Ave, Apt 1</u> <u>Worcester, MA 01610</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>784</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0157</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	

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Name

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	<p>Nonpriority creditor's name and mailing address Josephine Rivera 43 Abbott St Apt 3 Worcester, MA 01602</p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0158</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 882</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.2	<p>Nonpriority creditor's name and mailing address Juana Rivera 49 Orme St, Apt 1-F Worcester, MA 01608</p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0159</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 966</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.3	<p>Nonpriority creditor's name and mailing address Maite Rodriguez 18 E Capitol St Methuen MA 01844</p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0160</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 294</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.4	<p>Nonpriority creditor's name and mailing address Francis Rogriguez 38 Sterling St Worcester, MA 01610</p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0161</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 434</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.5	<p>Nonpriority creditor's name and mailing address Orquidea Rodriguez 461 Prospect St Methuen MA 01844</p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0162</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 392</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.6	<p>Nonpriority creditor's name and mailing address Miguel Rodriguez 40 Albion St Lawrence, MA 01841</p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>163</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 560</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

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Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Rebecca Rodriguez</u> <u>55 Alma St</u> <u>Lowell, MA 01854</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>784</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0164</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Valentina Rodriguez</u> <u>64 Arlington St</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>980</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0165</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Amalfis Rodriguez</u> <u>Worcester, MA 01610</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>1305</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0166</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Laura Rodriguez</u> <u>6 Lakeside Ave, Apt 6</u> <u>Worcester, MA 01603</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>2044</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0167</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Maria Rosario</u> <u>11 Lowell Terr, Apt 1</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>210</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0168</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1	Nonpriority creditor's name and mailing address Fausto Rosario 42 Willow St Lawrence, MA 01841 Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0169</u>	As of the petition filing date, the claim is: <u>\$ 224</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.2	Nonpriority creditor's name and mailing address Isabel Rosario 21 Bowdoin St, Apt 31 Worcester, MA 01609 Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0170</u>	As of the petition filing date, the claim is: <u>\$ 336</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.3	Nonpriority creditor's name and mailing address Jose Rosario 148 Steven St, Apt 4 Lowell, MA 01851 Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0171</u>	As of the petition filing date, the claim is: <u>\$ 784</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.4	Nonpriority creditor's name and mailing address Wanda Rosario 9 Clarkson St Worcester, MA 01604 Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0172</u>	As of the petition filing date, the claim is: <u>\$ 840</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.5	Nonpriority creditor's name and mailing address Elizabeth Rosario 32 Atkinson St Lawrence, MA 01843 Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0173</u>	As of the petition filing date, the claim is: <u>\$ 1176</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.6	Nonpriority creditor's name and mailing address Michael Ruiz 15 Mount Vernon St, Apt 3 Worcester, MA 01605 Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0174</u>	As of the petition filing date, the claim is: <u>\$ 1176</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Louisena Sanitill</u> <u>64 Colonel Bell Dr, Apt 2</u> <u>Brockton, MA 02301</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>1008</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0175</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Francis Salcedo</u> <u>87 Beacon Ave</u> <u>Lawrence, MA 01843</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>196</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0176</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Francisco Santiago</u> <u>273 Farnham St, Apt 1</u> <u>Lawrence, MA 01843</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>140</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0177</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Juan Santiago</u> <u>122 Franklin St</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>140</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0178</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Yngrid Santiago</u> <u>42 Willow St</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>560</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0179</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Case number (if known)

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1	Nonpriority creditor's name and mailing address Kimberlie Santiago 9 Crescent Southbridge, MA 01550	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1134
	Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0180	Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2	Nonpriority creditor's name and mailing address Minerva Santos 9 Albion St., Apt 2 Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 294
	Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0181	Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes text here	
3.3	Nonpriority creditor's name and mailing address Damaris Serra 25 Upland Gardens Dr, Apt 9 Worcester, MA 01607	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1596
	Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0182	Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.4	Nonpriority creditor's name and mailing address Karla Serrano 281 Prospect St Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 490
	Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0183	Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.5	Nonpriority creditor's name and mailing address Liza Soto 160 Franklin St Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 392
	Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0184	Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.6	Nonpriority creditor's name and mailing address Michelle Soto 208 Abbott St Lawrence, MA 01843	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1176
	Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0185	Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor

Name

Case number (if known)

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Dora Speing</u> <u>40 Montgomery</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>518</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0186</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Gladys Stocker</u> <u>14 Bartlett St, Apt 1</u> <u>Haverhill, MA 01830</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>1120</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0187</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Rosa Susana</u> <u>75 Union St, Apt 12</u> <u>Methuen, MA 01844</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>294</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0188</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Romane Tanis</u> <u>387 Merriam Ave</u> <u>Leominster, MA 01453</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>560</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0189</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Bielka Taveras</u> <u>210 Prospect St</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>210</u>
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0190</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address <u>Leidy Taveras</u> <u>42 Albiam St</u> <u>Lawrence, MA 01841</u> Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0191</u>	As of the petition filing date, the claim is: \$ <u>350</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.2	Nonpriority creditor's name and mailing address <u>Christopher Taveras</u> <u>80 Holly St</u> <u>Lawrence, MA 01841</u> Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0192</u>	As of the petition filing date, the claim is: \$ <u>588</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.3	Nonpriority creditor's name and mailing address <u>Milagros Taveras</u> <u>98 Farham St</u> <u>Lawrence, MA 0843</u> Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0193</u>	As of the petition filing date, the claim is: \$ <u>1120</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.4	Nonpriority creditor's name and mailing address <u>Yineska Torres</u> <u>55 Thetford Ave, pt 2</u> <u>Dorchester, MA 02124</u> Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0194</u>	As of the petition filing date, the claim is: \$ <u>630</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.5	Nonpriority creditor's name and mailing address <u>Maria Torres L</u> <u>108 Dorchester St, Apt 1</u> <u>Worcester, MA 01604</u> Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0195</u>	As of the petition filing date, the claim is: \$ <u>896</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.6	Nonpriority creditor's name and mailing address <u>Cecelia Ulloa</u> <u>46 Camden St</u> <u>Methuen MA 01844</u> Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0196</u>	As of the petition filing date, the claim is: \$ <u>294</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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Case number (if known)

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Juana Valdera</u> <u>93 Boston St, Apt 1</u> <u>Methuen MA 01844</u>	As of the petition filing date, the claim is: <u>\$ 294</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0197</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.	Nonpriority creditor's name and mailing address <u>Flerida Valdez</u> <u>66 Riverdale St, Apt 2</u> <u>Methuen MA 01844</u>	As of the petition filing date, the claim is: <u>\$ 490</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0198</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.	Nonpriority creditor's name and mailing address <u>Magdalena Valentin</u> <u>115 Lowell St, Apt 3A</u> <u>Lawrence, MA 0-1840</u>	As of the petition filing date, the claim is: <u>\$ 196</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0199</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.	Nonpriority creditor's name and mailing address <u>Alcides Valentin</u> <u>98 Country Club Blvd, Apt 317</u> <u>Worcester, MA 01605</u>	As of the petition filing date, the claim is: <u>\$ 420</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0200</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.	Nonpriority creditor's name and mailing address <u>Argenis Vargas</u> <u>461 Prospect St</u> <u>Methuen MA 01844</u>	As of the petition filing date, the claim is: <u>\$ 210</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0201</u>	Basis for the claim: <u>Wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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Name

Case number (if known)

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Kathy Vasquez</u> <u>525 Essex Street</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>245</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>202</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Priscilla Vera</u> <u>24 Ames Street</u> <u>Worcester, MA 01610</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>1658</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>203</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Yanilda Webb</u> <u>58 Oakland Ave. Apt 4</u> <u>Methuen, MA 01844</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ _____
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>204</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Jahaire Webb</u> <u>35 Cornish Street</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>728</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>205</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Florence Gathogo</u> <u>9 Sunset Ave.</u> <u>Methuen, MA 01844</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>1176</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>209</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Job Gichuru</u> <u>P.O Box 2371</u> <u>Lowell, MA 01851</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>84</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>209</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>James Githiri</u> <u>157 Leyfred Terrace</u> <u>Springfield, MA 01108</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>308</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>210</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Martha Kahiga</u> <u>20 Warner Ave. Apt. 3A</u> <u>Worcester, MA 01604</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>588</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>212</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Dorothy Kamau</u> <u>294 Greenwood St</u> <u>Worcester, MA 01607</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>196</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>213</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Mary Muthon</u> <u>390 Salem Street</u> <u>Lawrence, MA 01843</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>56</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>214</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Case number (if known)

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Monica G. Kamau</u> <u>15 Clarence Street</u> <u>Worcester, MA 01605</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>196</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>215</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Nancy Kamau</u> <u>42B Pearl Street Apt. 1</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>504</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>216</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Nancy Karuki</u> <u>128 6th Street 1st Floor</u> <u>Lowell, MA 01850</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>600</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>217</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Margaret Kibugi</u> <u>32 Focos Lane</u> <u>Ludlow, MA 01056</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>318</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>218</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Philomena Kiguru</u> <u>20 Merrifield St</u> <u>Worcester, MA 01605</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>840</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>219</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Case number (if known)

Name

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Anne Kihungi</u> <u>80 Progressive Street</u> <u>Worcester, MA 01604</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>4564</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>220</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Joyce Kinyanjui</u> <u>1895 Middlesex St Apt. 6</u> <u>Lowell, MA 01851</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>3136</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>221</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Hannah Kiongo</u> <u>10B Sabino Farm Rd, Apt. 4</u> <u>Peabody, MA 01900</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>1204</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>222</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Martha Kungu</u> <u>771 Norwest Dr</u> <u>Norwood, MA 02062</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>1148</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>223</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Carmel Laguerre</u> <u>498 Holman St</u> <u>Lunenburg, MA 01462</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>770</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>224</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Case number (if known)

Name

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim	
3.1	Nonpriority creditor's name and mailing address Jay Makonyonga 3108 Windsor Ridge Westborough, MA 01581 Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0225</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 896
3.2	Nonpriority creditor's name and mailing address Stephen Mbagu 18 Pond Street Methuen, MA 01844 Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0226</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type text here Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 112
3.3	Nonpriority creditor's name and mailing address Beatrice Mbugua 60 Pendleton Ave Springfield, MA 01129 Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0227</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type text here Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$
3.4	Nonpriority creditor's name and mailing address isaac Muchiri 25 Beech Street Lowell, MA 01850 Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0228</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 11680
3.5	Nonpriority creditor's name and mailing address James Mugwanja 182 Mazarin St Springfield, MA 01151 Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0229</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1680
3.6	Nonpriority creditor's name and mailing address Joseph Muigai 58 Cheyenne Rd Worcester, MA 01606 Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0230</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1820

Debtor

Compassionate Homecare Document

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Case number (if known)

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address Jedidah Muriuki 227 18th St Apt 102 Dracut, MA	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 252
	Date or dates debt was incurred 2/1/16-4/1/16 Last 4 digits of account number 0231	Basis for the claim: wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address John Muthama 123 Lamon St Springfield, MA 01119	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 420
	Date or dates debt was incurred 2/1/16-4/1/16 Last 4 digits of account number 0232	Basis for the claim: wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address Beth Mwangi 18 Bodwell Ave. Lowell, MA 01854	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1260
	Date or dates debt was incurred 2/1/16-4/1/16 Last 4 digits of account number 0233	Basis for the claim: wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address Annie Ngugi 4 Kimball Court Apt 213 Woburn, MA 01801	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1904
	Date or dates debt was incurred 2/1/16-4/1/16 Last 4 digits of account number 0234	Basis for the claim: wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$
		Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor

Name

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1	Nonpriority creditor's name and mailing address <u>James Ngugi</u> <u>17 Royal Crest Drive Apt. 4</u> <u>N. Andover, MA 01845</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>1372</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0235</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2	Nonpriority creditor's name and mailing address <u>Carol Ngunjiri</u> <u>11 Lilac Lane</u> <u>Worcester, MA 01607</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>2380</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0236</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.3	Nonpriority creditor's name and mailing address <u>Rose Njenga</u> <u>5 Hollman road</u> <u>Milbury, MA 01527</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>616</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0237</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.4	Nonpriority creditor's name and mailing address <u>Daniel W. Njogu</u> <u>9 Princeton Drive</u> <u>North Chelmsford, MA 01863</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>2828</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0238</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.5	Nonpriority creditor's name and mailing address <u>Agnes Njonjo</u> <u>55 Gates Avenue</u> <u>Springfield, MA 01118</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>2730</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0239</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.6	Nonpriority creditor's name and mailing address <u>Joan Njoroge</u> <u>7 Hazel Street</u> <u>Worcester, MA 01604</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>1316</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0240</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor

Name

Case number (if known)

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Myrlande Obas</u> <u>39 Hampden St</u> <u>Swampscott, MA 01907</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>1890</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0241</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Rebecca Wakulyaka</u> <u>297 Proctor Avenue</u> <u>Revere, MA 02145</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>210</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0242</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Margaret Wambui</u> <u>41 Spring Road</u> <u>Dracut, MA 01826</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>2100</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0243</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Veronica Wanguthi</u> <u>135 Armstrong Ave.</u> <u>Methuen, MA 01844</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <u>Type text here</u>	\$ <u>1652</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0244</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Peter Waruingi</u> <u>224 Pleasant Street</u> <u>Lowell, MA 01852</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>28</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0245</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor

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Case number (if known)

Name

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	<p>Nonpriority creditor's name and mailing address <u>Martin Zigwati</u> <u>27 Aberdeen Rd</u> <u>Springfield, MA 01109</u></p> <p>Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0246</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 3052</u> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.2	<p>Nonpriority creditor's name and mailing address <u>Winifred Kabogoh</u> <u>171 East St Bld D, Apt 343</u> <u>Methuen, MA 01844</u></p> <p>Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0247</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 4902</u> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.3	<p>Nonpriority creditor's name and mailing address <u>Catherine Carlstrom</u> <u>180 Salem Road</u> <u>Dracut, MA 01826</u></p> <p>Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0248</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 1360</u> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.4	<p>Nonpriority creditor's name and mailing address <u>Hector Acevedo</u> <u>80 Burt Rd</u> <u>Springfield, MA 01118</u></p> <p>Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0249</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 2920</u> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.5	<p>Nonpriority creditor's name and mailing address <u>Holly Aiken</u> <u>225 Meadow St</u> <u>Chicopee, MA 01013</u></p> <p>Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0250</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 595</u> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.6	<p>Nonpriority creditor's name and mailing address <u>Oksana Anderson</u> <u>303 Partridge St Gardner, MA 01440</u> <u>Worcester, MA 01604</u></p> <p>Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0251</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 888</u> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

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Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Chilson Anzeze</u> <u>97 Newfield Road</u> <u>Springfield, MA 01119</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>245</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0252</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Marie Brazile</u> <u>P.O. Box 413 South Lancaster, MA 01561</u> <u>Revere, MA 02145</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>1771</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0253</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Jennifer Campbell</u> <u>54 Church Street</u> <u>Milton, MA 02186</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>1050</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0254</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Theodora Chitemere</u> <u>132 Tiffany Street</u> <u>Springfield, MA 01108</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>3420</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0255</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Katrina Flamand</u> <u>285 Marcy St</u> <u>Southbridge, MA 01550</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>40</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0256</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Name

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1	Nonpriority creditor's name and mailing address <u>Joycephine Gituku</u> <u>15 Corthell Rd</u> <u>Billerica, MA 01821</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>1260</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0257</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2	Nonpriority creditor's name and mailing address <u>Francis Kangara</u> <u>171 East St Bld D, Apt 3433 Derry Way Apt 17,</u> <u>Derry, NH 03038</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>525</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0258</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.3	Nonpriority creditor's name and mailing address <u>Kenneth Kimani</u> <u>111Hawks Circle</u> <u>Westfield, MA 01085</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>1435</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0259</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.4	Nonpriority creditor's name and mailing address <u>Mary Macharia</u> <u>P.O. Box 4436 Springfield, MA 01101</u> <u>Springfield, MA 01118</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>1190</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0260</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.5	Nonpriority creditor's name and mailing address <u>Mary Maina</u> <u>135 Armstrong Ave.</u> <u>Methuen, MA 01844</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>2205</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0261</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.6	Nonpriority creditor's name and mailing address <u>Symmon Maina</u> <u>488 Prospect Street</u> <u>Methuen, MA 01844</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>2310</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0262</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Ruth Mburu</u> <u>3 John Ave.</u> <u>Holbrook, MA 02343</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>70</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0263</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Catherine Nyanjui</u> <u>41 Parkhurst Road</u> <u>Chelmsford, MA 01824</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>85</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0264</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Randy Obas</u> <u>89 Stoughton St.</u> <u>Stoughton, MA 02072</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>2975</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0265</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Ruth Ongaro</u> <u>35 New Ludlow Rd</u> <u>Chicopee, MA 01075</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <u>Type text here</u>	\$ <u>152</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0266</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Paul Pricop</u> <u>409 Middlesex Avenue</u> <u>Wilmington, MA 01887</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>808.50</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0267</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Case number (if known)

Name

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address <u>Jazmin Valianti</u> <u>106 Glen Ave</u> <u>Upton, MA 01568</u> Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0268</u>	As of the petition filing date, the claim is: \$ <u>912</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.2	Nonpriority creditor's name and mailing address <u>Emmah Wanijru</u> <u>418 Meadow Ave. Unit A</u> <u>Agawam, MA 01119</u> Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0269</u>	As of the petition filing date, the claim is: \$ <u>1116</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type text here Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.3	Nonpriority creditor's name and mailing address <u>Eunice Waweru</u> <u>54 Bissell Ave</u> <u>Springfield, MA 01119</u> Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>270</u>	As of the petition filing date, the claim is: \$ <u>6975</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type text here Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.4	Nonpriority creditor's name and mailing address <u>Jose Guzman, Jr</u> <u>91 Summer Street</u> <u>Lawrence, MA 01840</u> Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0271</u>	As of the petition filing date, the claim is: \$ <u>56</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.5	Nonpriority creditor's name and mailing address <u>Yannirys Abreu</u> <u>27 Kingston Street</u> <u>N. Andover, MA 01845</u> Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0272</u>	As of the petition filing date, the claim is: \$ <u>224</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.6	Nonpriority creditor's name and mailing address <u>Edwin Abreu</u> <u>27 Kingston Street</u> <u>N Andover, MA 01845</u> Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>273</u>	As of the petition filing date, the claim is: \$ <u>392</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Miguelina Abreu</u> <u>65 Jamaica St</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>392</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0274</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Rosa Acevedo</u> <u>53 Swan Street Apt 3</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>392</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0275</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Leonel Acevedo</u> <u>70 Brook Street</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>1260</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0276</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Maribel Alba</u> <u>103 Ferry Street</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>910</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0277</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Carline Alfred</u> <u>125 Homestead St Apt. 6</u> <u>Dorchester, MA 02121</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>511</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0278</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Case number (if known)

Name

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	<p>Nonpriority creditor's name and mailing address <u>Trinidad Almonte</u> <u>85 Howard St</u> <u>Lawrence, MA 01841</u></p> <p>Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>279</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 2016</u> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.2	<p>Nonpriority creditor's name and mailing address <u>Rangelys Alvarez</u> <u>89 Railroad St</u> <u>Lawrence, MA 01841</u></p> <p>Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0280</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 1658</u> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.3	<p>Nonpriority creditor's name and mailing address <u>Aracelis Andino</u> <u>133 East Haverill St Apt. 1</u> <u>Lawrence, MA 01841</u></p> <p>Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>281</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 420</u> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.4	<p>Nonpriority creditor's name and mailing address <u>Ruben Andujar</u> <u>39 Groton Street</u> <u>Lawrence, MA 01843</u></p> <p>Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0282</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 504</u> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.5	<p>Nonpriority creditor's name and mailing address <u>Wilson Aquino</u> <u>46 Bennington Street</u> <u>Lawrence, MA 01841</u></p> <p>Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0283</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 336</u> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.6	<p>Nonpriority creditor's name and mailing address <u>Gregoria Arias</u> <u>678 Essex Street</u> <u>Lawrence, MA 01841</u></p> <p>Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>284</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 392</u> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

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Case number (if known)

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Mayra Arias De Marte</u> <u>48 Marston St</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>1658</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>285</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Natividad Aybar</u> <u>210 Chandler St Apt 3</u> <u>Worcester, MA 01609</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>168</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0286</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Elvia Batista</u> <u>478 Riverside Dr</u> <u>Lawrence, MA 01841</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>196</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0287</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Jatnna Bautista</u> <u>4 Wentworth St</u> <u>Worcester, MA 01603</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <u>Type text here</u>	\$ <u>126</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0288</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Beatrice Mbugua</u> <u>60 Pendleton Ave</u> <u>Springfield, MA 01129</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>1512</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0289</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Edith Eghbalighayazi</u> <u>225 Cliff St Extension</u> <u>Norwich, CT 06360</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>2080</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>290</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Wilberto Rodriguez</u> <u>225 Cliff St Extension</u> <u>Norwich, CT 06360</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>52000</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0291</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Lucas Hill</u> <u>83 Bennington St</u> <u>Salem, NH</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>10000</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0292</u>	Basis for the claim: <u>wages</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Nelson Revocable Trust</u> <u>10 Valley View Drive</u> <u>N. Grafton, MA 01536</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <u>Type text here</u>	\$ <u>106498</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0293</u>	Basis for the claim: <u>money loaned</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Advanced Billing Technology</u> <u>655 Boston Road, Suite 4B</u> <u>Billerica, MA 01821</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>1,149000</u>
	Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0294</u>	Basis for the claim: <u>comission earned</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Case number (if known)

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address Compassionate Healthcare Systems, LLC 1275 Elm Street Suite D West Springfield, MA 01089 Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>295</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: <u>loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>778500</u>
3.	Nonpriority creditor's name and mailing address Helen Kiago 37 Highland Street Worcester, MA 01609 Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0296</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>100000</u>
3.	Nonpriority creditor's name and mailing address Wanjiku Kagai 25 Emmett Way Lowell, MA 01851 Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0297</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>100000</u>
3.	Nonpriority creditor's name and mailing address Francis Ngigi 35 Robbins Ave Unit 71 Dracut, MA 01851 Date or dates debt was incurred <u>2/1/16-4/1/16</u> Last 4 digits of account number <u>0298</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>money loaned</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>700000</u>
3.	Nonpriority creditor's name and mailing address Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$

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Name

Case number (if known)

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	<p>Nonpriority creditor's name and mailing address <u>Commonwealth of Massachusetts</u> <u>c/o Office of Attorney General</u> <u>1 Ashburton Place Boston, MA</u></p> <p>Date or dates debt was incurred <u>2013-4/2016</u> Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <u>\$ 34,000,000</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed</p> <p>Basis for the claim: <u>regulations & contract</u></p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>
3.	<p>Nonpriority creditor's name and mailing address <u>MassHealth</u> <u>c/o Office of Attorney General</u> <u>1 Ashburton Place Boston, MA</u></p> <p>Date or dates debt was incurred <u>2013-4/2016</u> Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <u>\$ 505,000</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>regulations & contract</u></p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>
3.	<p>Nonpriority creditor's name and mailing address <u>Department of Revenue, Com of MA</u> <u>P.O. Box 7000</u> <u>Boston, MA 02204</u></p> <p>Date or dates debt was incurred <u>1/1/16-4/30/16</u> Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <u>\$ 698,699.51</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>tax lien</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.	<p>Nonpriority creditor's name and mailing address _____ _____ _____</p> <p>Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: \$ _____ Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.	<p>Nonpriority creditor's name and mailing address _____ _____ _____</p> <p>Date or dates debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: \$ _____ Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>

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Case number (if known)

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Commonwealth of Massachusetts</u> <u>c/o Office of Attorney General</u> <u>1 Ashburton Place Boston, MA</u> Date or dates debt was incurred <u>2013-4/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ 34,000,000</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: <u>regulations & contract</u> Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
3.	Nonpriority creditor's name and mailing address <u>MassHealth</u> <u>c/o Office of Attorney General</u> <u>1 Ashburton Place Boston, MA</u> Date or dates debt was incurred <u>2013-4/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ 505,000</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>regulations & contract</u> Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
3.	Nonpriority creditor's name and mailing address <u>Department of Revenue, Com of MA</u> <u>P.O. Box 7000</u> <u>Boston, MA 02204</u> Date or dates debt was incurred <u>1/1/16-4/30/16</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ 698,699.51</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>tax lien</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.	Nonpriority creditor's name and mailing address _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ _____ Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.	Nonpriority creditor's name and mailing address _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ _____ Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes